Case 16-22118 Doc 1 Filed 07/09/16 Entered 07/09/16 15:10:32 Desc Main Document Page 1 of 54

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself			
			About Debtor 1:	A	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name			
		e the name that is on government-issued	James	_	
	picture identi example, you	ure identification (for	First name	F	First name
		nse or passport).	Middle name		Middle name
	iden	g your picture tification to your ting with the trustee.	Klemz Last name and Suffix (Sr., Jr., II, III)	L	_ast name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years			
		ude your married or den names.			
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-8894		

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Debtor 1 James W Klemz

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 1438 Walnut Circle Carol Stream, IL 60188 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code **DuPage** County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Check one: Check one:

Why you are choosing this district to file for bankruptcy

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case number (if known)

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Case number (if known) Debtor 1 James W Klemz

ar	Tell the Court About	Your E	3ankruptcy Ca	ase					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7							
	choosing to file under								
			Chapter 11						
			Chapter 12						
			Chapter 13						
3.	How you will pay the fee	•	about how yo	ou may pay. Typ attorney is subi	pically, if you are paying the fee yo	k with the clerk's office in your local court for more de urself, you may pay with cash, cashier's check, or mo alf, your attorney may pay with a credit card or check	oney		
					tallments. If you choose this options (Official Form 103A).	n, sign and attach the Application for Individuals to F	Pay		
			n only if you are filing for Chapter 7. By law, a judge n	nav.					
		_	but is not req applies to you	uired to, waive y ur family size ar	your fee, and may do so only if yond you are unable to pay the fee in	ur income is less than 150% of the official poverty lin installments). If you choose this option, you must fill ial Form 103B) and file it with your petition.	e that		
).	Have you filed for bankruptcy within the	■ N	0.						
	last 8 years?	ΠY	es.						
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy cases pending or being	■ N	0						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	ΠY	es.						
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor	-		Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	■ N	o. Go to I	ine 12.					
	residence:	ΠY	es. Has yo	our landlord obta	ained an eviction judgment agains	t you and do you want to stay in your residence?			
				No. Go to line	12.				
				Yes. Fill out <i>In</i> bankruptcy per		Judgment Against You (Form 101A) and file it with thi	s		

Desc Main Document Page 4 of 54 Debtor 1 James W Klemz Case number (if known) Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure Bankruptcy Code and are you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No.

property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 James W Klemz Document Page 5 of 54 Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) James W Klemz Debtor 1 **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **25,001-50,000** 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ■ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ James W Klemz Signature of Debtor 2 James W Klemz Signature of Debtor 1 Executed on July 9, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1 James W Klemz

Document Page 7 of 54

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel	L. Giudice	Date	July 9, 2016	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Daniel L. (Giudice			
Printed name				
Giudice La	aw, Ltd.			
	Church Road le, IL 60106			
Number, Street,	City, State & ZIP Code			
Contact phone	630-595-4520	Email address	giudicelaw@gmail.com	
6192361				
Bar number & S	tate			

		Docum	ent Page 8 of 54	4	
Fill in this inforr	nation to identify your	case:			
Debtor 1	James W Klemz				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number _					☐ Check if this is an
					amended filing
					ŭ

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	119,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	16,490.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	135,490.00
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	107,997.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	110,198.56
	Your total liabilities	\$	218,195.56
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,236.52
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,059.52
Pai	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	nersonal	family or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 James W Klemz

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Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

\$______2,752.64

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total o	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	(Case 16-22118		iled 07/ Docum		Entered 07/09/16	5 15:10:32	Desc	Main	
Fill	in this inf	ormation to identify yo								
Deb	otor 1	James W Klem	Z Middle N	lame		Last Name				
	otor 2	First Name	Middle N	lame		Last Name				
						OIC				
Unii	ted States	Bankruptcy Court for the	: NORTHERN	DISTRICT	OF ILLIN	OIS				
Cas	se number								Check if this is an amended filing	
_		orm 106A/B ale A/B: Pro	nertv						12/15	
nfor nsv	mation. If n wer every q	nore space is needed, atta	ch a separate she	et to this fo	orm. On the	are filing together, both are e top of any additional pages, '				
. Do	o you own	or have any legal or equita	ble interest in an	y residence	, building, l	land, or similar property?				
	No. Go to	Part 2.								
	Yes. Whe	re is the property?								
1.1				What is th	e property	? Check all that apply				
	1438 W	alnut Circle		_	gle-family h		Do not deduct se	cured claims	or exemptions. Put	
	Street addre	ess, if available, or other descript	ion			-unit building or cooperative	the amount of an	of any secured claims on Schedule D: tho Have Claims Secured by Property.		
	Carol S	tream IL 6	0188-0000	☐ Mar		or mobile home	Current value of entire property?		urrent value of the ortion you own?	
	City	State	ZIP Code	☐ Inve	estment pro	perty	\$119,00	-	\$119,000.00	
				☐ Oth		in the property? Check one	Describe the nature of your ownership intereduced (such as fee simple, tenancy by the entiretien a life estate), if known.			
					otor 1 only					
	DuPage	•		☐ Deb	otor 2 only					
	County			☐ Deb	otor 1 and D	ebtor 2 only	Check if thi	s is commu	nity property	
				At le	east one of	the debtors and another	(see instruction		mry proporty	
					rmation yo dentificatio	u wish to add about this item n number:	such as local			

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$119,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Case 16-22118 Doc 1 Filed 07/09/16 Entered 07/09/16 15:10:32 Desc Main Document Page 11 of 54 Case number (if known) James W Klemz Debtor 1 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Do not deduct secured claims or exemptions. Put Honda Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Civic Creditors Who Have Claims Secured by Property. Model Debtor 1 only 1989 Year: Debtor 2 only Current value of the Current value of the 145,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$1,000.00 \$1,000.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Chevrolet Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: Cruze Creditors Who Have Claims Secured by Property. ■ Debtor 1 only Model: 2014 Debtor 2 only Year: Current value of the Current value of the 27,000 portion you own? entire property? Approximate mileage: ☐ Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$15,000.00 \$15,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$16,000.00 pages you have attached for Part 2. Write that number here......=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... \$300.00 Location: 1438 Walnut Circle, Carol Stream IL 60188 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices

including cell phones, cameras, media players, games

■ No

☐ Yes. Describe.....

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No

☐ Yes. Describe.....

Debtor 1	James W Klemz	Document	Page 12 of 54 Case number (if know	(n)
				,
	nent for sports and hobbies bles: Sports, photographic, exercise musical instruments	e, and other hobby equipment	bicycles, pool tables, golf clubs, skis; canoe	es and kayaks; carpentry tools;
■ No				
☐ Yes.	Describe			
10. Firear	ms pples: Pistols, rifles, shotguns, amr	nunition, and related equipme	nt .	
■ No	pies. i istois, illies, shotguns, airii	numinon, and related equipme	n.	
☐ Yes.	. Describe			
11. Clothe	es aples: Everyday clothes, furs, leath	er coats, designer wear, shoe	s accessories	
□ No	pics. Everyday ciotics, idis, icati	er coats, acsigner wear, snoc	3, 40003301103	
Yes.	. Describe			
	Location: 14	38 Walnut Circle, Carol S	Stream IL 60188	\$150.00
40 Jamel				
12. Jewel i Exam		ewelry, engagement rings, we	dding rings, heirloom jewelry, watches, gems	s, gold, silver
■ No				
☐ Yes.	. Describe			
	arm animals			
Exam ■ No	aples: Dogs, cats, birds, horses			
	. Describe			
		did alsalas de list	to the discount of the state of	
14. Any o i	tner personal and nousehold ite	ems you did not aiready list,	including any health aids you did not list	
	. Give specific information			
			any entries for pages you have attached	\$450.00
for P	art 3. Write that number here			
Down do Do	il- V Financial Access			
	escribe Your Financial Assets wn or have any legal or equitabl	e interest in any of the follo	wing?	Current value of the
, , , , ,	,		3	portion you own?
				Do not deduct secured claims or exemptions.
16. Cash				
Exam	nples: Money you have in your wall	let, in your home, in a safe dep	oosit box, and on hand when you file your pe	tition
□ No				
■ Yes.				
			Cash	
			Location:	
			1438 Walnut Circle, Carol	
			Stream IL	* 40.00
			60188	\$40.00
17 Dance	cits of manay			
			of deposit; shares in credit unions, brokerag	e houses, and other similar
.	institutions. If you have mult	iple accounts with the same in	stitution, list each.	
■ No		Institution	name:	
<u> </u>				

Case 16-22118 Doc 1 Filed 07/09/16 Entered 07/09/16 15:10:32 Desc Main Document Page 13 of 54 Case number (if known)

De	ebtor 1	James W Klemz	Boodinent	r age 10 or o	Case number (if known)	
18.	Exampl	mutual funds, or publicly traded stoo es: Bond funds, investment accounts w		ey market accounts		
	■ No □ Yes	Institution or is	ssuer name:			
19.	joint ve	olicly traded stock and interests in ir nture	ncorporated and uninco	rporated business	ses, including an interest in	an LLC, partnership, and
	■ No □ Yes.	Give specific information about them Name of entity:			% of ownership:	
20.	Negotia	ment and corporate bonds and other ble instruments include personal check gotiable instruments are those you can	s, cashiers' checks, pron	nissory notes, and r	noney orders.	
	☐ Yes. 0	Give specific information about them Issuer name:				
21.		ent or pension accounts es: Interests in IRA, ERISA, Keogh, 40	1(k), 403(b), thrift savings	accounts, or other	pension or profit-sharing plan	ns
		ist each account separately. Type of account:	Institution na	ame:		
22.	Your sh	deposits and prepayments are of all unused deposits you have mades: Agreements with landlords, prepaid				, or others
			Institution na	ame or individual:		
23.	Annuition	es (A contract for a periodic payment of	money to you, either for	life or for a number	of years)	
	☐ Yes	Issuer name and descript	ion.			
24.		s in an education IRA, in an account 5. §§ 530(b)(1), 529A(b), and 529(b)(1).		gram, or under a q	ualified state tuition progra	ım.
	☐ Yes	Institution name and desc	cription. Separately file th	e records of any into	erests.11 U.S.C. § 521(c):	
25.	■ No	equitable or future interests in prope	erty (other than anything	g listed in line 1), a	and rights or powers exercis	sable for your benefit
		Give specific information about them	ota and atheritatellants	-1		
26.		, copyrights, trademarks, trade secre es: Internet domain names, websites, p			nents	
		Give specific information about them				
27.		 s, franchises, and other general inta es: Building permits, exclusive licenses 		holdings, liquor lice	enses, professional licenses	
	☐ Yes.	Give specific information about them				
M	oney or p	roperty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	_	inds owed to you				
	■ No □ Yes. 0	Give specific information about them, in	cluding whether you alrea	ady filed the returns	and the tax years	

Tes. Give specific information about them, including whether you already filed the returns and the tax years......

Debt	or 1	Case 16-22118 James W Klemz	B Doc 1	Filed 07/09/16 Document	Entered 07/09/16 15:10:32 Page 14 of 54 Case number (if known)	Desc Main		
Debt	01 1	James W Riemz						
	29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information							
	E <i>xamµ</i> No	amounts someone owe bles: Unpaid wages, disal benefits; unpaid loa Give specific information	bility insurance parts you made to		efits, sick pay, vacation pay, workers' compe	nsation, Social Security		
I		ts in insurance policies oles: Health, disability, or		nealth savings account (F	HSA); credit, homeowner's, or renter's insurar	nce		
	Yes.	Name the insurance com Co	npany of each po ompany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:		
 	32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No □ Yes. Give specific information							
	33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No □ Yes. Describe each claim							
	No	contingent and unliquid		every nature, including	g counterclaims of the debtor and rights to	set off claims		
35. A	ny fin	ancial assets you did r	not already list					
_	No	Give specific information	-					
		he dollar value of all of art 4. Write that number			ny entries for pages you have attached	\$40.00		
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.								
37. Do you own or have any legal or equitable interest in any business-related property? ■ No. Go to Part 6. □ Yes. Go to line 38.								
Part 6		scribe Any Farm- and Com ou own or have an interest in			n or Have an Interest In.			
]	No.	own or have any legal Go to Part 7. . Go to line 47.	or equitable in	terest in any farm- or c	commercial fishing-related property?			
Part 7	7:	Describe All Property Yo	ou Own or Have a	n Interest in That You Did	Not List Above			

53. **Do you have other property of any kind you did not already list?** *Examples:* Season tickets, country club membership

 $\hfill \square$ Yes. Give specific information.......

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Case number (if known) Document

Debtor 1 James W Klemz

54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$119,000.00 Part 2: Total vehicles, line 5 56. \$16,000.00 57. Part 3: Total personal and household items, line 15 \$450.00 Part 4: Total financial assets, line 36 58. \$40.00 Part 5: Total business-related property, line 45 \$0.00 59. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$16,490.00 \$16,490.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$135,490.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this info	rmation to identify your	case:		
Debtor 1	James W Klemz			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are	vou claiming	? Check one only	. even if vour st	oouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$119,000.00		\$15,000.00	735 ILCS 5/12-901
		100% of fair market value, up to any applicable statutory limit	
\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$15,000.00		\$0.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$300.00		\$300.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$150.00		\$150.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
	\$119,000.00 \$15,000.00 \$300.00	\$119,000.00	Check only one box for each exemption. \$119,000.00 \$15,000.00 100% of fair market value, up to any applicable statutory limit \$1,000.00 100% of fair market value, up to any applicable statutory limit \$15,000.00 \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit \$300.00 \$300.00 \$100% of fair market value, up to any applicable statutory limit \$150.00 \$100% of fair market value, up to any applicable statutory limit

Case 16-22118 Filed 07/09/16 Entered 07/09/16 15:10:32 Document Page 17 of 54 Case number (if known) Debtor 1 James W Klemz Brief description of the property and line on Schedule A/B that lists this property Current value of the Amount of the exemption you claim Specific laws that allow exemption portion you own Copy the value from Check only one box for each exemption. Schedule A/B Cash 735 ILCS 5/12-803, 740 ILCS \$40.00 \$40.00 Location: 1438 Walnut Circle, Carol 170/4 Stream IL 60188 100% of fair market value, up to Line from Schedule A/B: 16.1 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Doc 1

Yes

Desc Main

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Fill in this information to identify yo	our case:					
Debtor 1 James W Klem	17					
First Name		et Name	-			
Debtor 2						
(Spouse if, filing) First Name	Middle Name Las	st Name				
United States Bankruptcy Court for the	e: NORTHERN DISTRICT OF ILLINO	IS				
			-			
Case number						
(if known)			_	if this is an		
			ameno	led filing		
Official Form 106D						
Schedule D: Creditor:	s Who Have Claims Se	cured by Propert	У	12/15		
	. If two married people are filing together, be tout, number the entries, and attach it to thin by your property?					
☐ No. Check this box and submit	this form to the court with your other sche	edules. You have nothing else	to report on this form.			
■ Yes. Fill in all of the information	,		.,			
	i below.					
Part 1: List All Secured Claims		Calumn A	Column B	Column C		
for each claim. If more than one creditor ha	s more than one secured claim, list the creditor as a particular claim, list the other creditors in P stical order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion		
2.1 Midwest Bank	Describe the property that secures the cl	laim: \$91,455.00	\$119,000.00	\$0.00		
Creditor's Name	1438 Walnut Circle Carol Stream 60188 DuPage County	ı, IL				
PO Box 689	As of the date you file, the claim is: Check	all that				
Freeport, IL 61032-0689	apply. ☐ Contingent					
Number, Street, City, State & Zip Code	☐ Unliquidated					
Number, Street, Oity, State & Zip Gode	☐ Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
■ Debtor 1 only	■ An agreement you made (such as mortg	agae or secured				
Debtor 2 only	car loan)	age of secured				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	30 11011)				
☐ Check if this claim relates to a	Other (including a right to offset)					
community debt						
Date debt was incurred 5-10-2013	Last 4 digits of account number	3544				
2.2 PNC Bank NA	Describe the property that secures the cl	laim: \$16,542.00	\$15,000.00	\$1,542.00		
Creditor's Name	2014 Chevrolet Cruze 27,000 mi		\$13,000.00	\$1,342.00		
oroditor o marine	2014 Chevrolet Cruze 27,000 mil	ies				
PO Box 3180	As of the date you file, the claim is: Check apply.	all that				
Pittsburgh, PA 15222	Contingent					
Number, Street, City, State & Zip Code	☐ Unliquidated					
	☐ Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
☐ Debtor 1 only ☐ An agreement you made (such as mortgage or secured						
Debtor 2 only car loan)						
☐ Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien)						
At least one of the debtors and another ☐ Judgment lien from a lawsuit						
☐ Check if this claim relates to a	☐ Other (including a right to offset)					
community debt						
Date debt was incurred 01/09/2014	Last 4 digits of account number	1817				

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Debtor 1	James W Klemz			Case number (if know)	
	First Name	Middle Name	Last Name	_	
					_
Add the	dollar value of ye	our entries in Column A on t	his page. Write that number here:	\$107,997.00	0
	the last page of at number here:	your form, add the dollar va	lue totals from all pages.	\$107,997.00	0

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

	0000 10 22110	Document	Page 20	of 54	oz bese man	
Fill in th	is information to identify your					
Debtor 1	James W Klemz					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if,		Middle Name	Last Name			
	0,					
United S	states Bankruptcy Court for the:	NORTHERN DISTRICT OF ILI	INOIS			
Case nu	mber					
(if known)					☐ Check if this is an	
					amended filing	
Officia	I Form 106E/F					
	dule E/F: Creditors W	ho Have Unsecured	Claims		12/15	
any execu Schedule Schedule left. Attacl	nplete and accurate as possible. Us ttory contracts or unexpired leases G: Executory Contracts and Unexpi D: Creditors Who Have Claims Sect the Continuation Page to this pag case number (if known).	that could result in a claim. Also li ired Leases (Official Form 106G). D ured by Property. If more space is i	ist executory c o not include a needed, copy t	ontracts on Schedule A/B: P any creditors with partially s he Part you need, fill it out, r	roperty (Official Form 106A/B) and ecured claims that are listed in number the entries in the boxes on	on
Part 1:	List All of Your PRIORITY Un	secured Claims				
_	ny creditors have priority unsecure	d claims against you?				
	o. Go to Part 2.					
□ Y	_					
Part 2:	List All of Your NONPRIORIT					
3. Do a	ny creditors have nonpriority unsec	ured claims against you?				
ПΝ	o. You have nothing to report in this pa	art. Submit this form to the court with	your other sche	dules.		
■ Y	es.					
unse	all of your nonpriority unsecured cla cured claim, list the creditor separately one creditor holds a particular claim, li 2.	for each claim. For each claim listed	, identify what t	ype of claim it is. Do not list cla	nims already included in Part 1. If more	
					Total claim	
	Adventist Bolingbrook Hosp	Last 4 digits of acc	ount number	0113	\$10,818	.35
	Nonpriority Creditor's Name 500 Remington Blvd	When was the debt	incurred?			
	Bolingbrook, IL 60440	Wildin Was the about	ouriou.			
ī	Number Street City State Zlp Code	As of the date you	file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and and		ITY unsecured	l claim:		
	Check if this claim is for a comm	_				
	debt Is the claim subject to offset?	☐ Obligations arising report as priority claits		ration agreement or divorce the	at you did not	
	■ No	<u>'</u> ' '		g plans, and other similar debts	S	
	□ Yes	Other. Specify	•	• •		
!	— 163	Other. Specify _	cuicai 3Ci	11000		

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Debtor 1 James W Klemz Case number (if know) 4.2 **Adventist Bolingbrook Hospital** Last 4 digits of account number 8027 \$43.00 Nonpriority Creditor's Name 500 Remington Blvd When was the debt incurred? PO Box 7000 Bolingbrook, IL 60440-7000 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical services ☐ Yes 4.3 **Adventist Bolingbrook Hospital** Last 4 digits of account number 7480 \$43.00 Nonpriority Creditor's Name 500 Reminaton Blvd When was the debt incurred? PO Box 7000 Bolingbrook, IL 60440-7000 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes medical services Other. Specify \$201.00 4.4 **Armor Systems Corp** Last 4 digits of account number 0248 Nonpriority Creditor's Name 1700 Kiefer Dr., Suite 1 When was the debt incurred? Zion, IL 60099-5105 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify COLLECTION

Document Page 22 of 54 Debtor 1 James W Klemz Case number (if know) 4.5 **Bank of America** Last 4 digits of account number 6042 \$16,776.00 Nonpriority Creditor's Name Po Box 982238 When was the debt incurred? El Paso, TX 79998-2238 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes 4.6 **BP VISA/Syncb** Last 4 digits of account number 1352 \$3,737.52 Nonpriority Creditor's Name PO Box 530942 When was the debt incurred? Atlanta, GA 30353-0942 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Π Yes Credit card purchases Other. Specify 4.7 **Capital One Bank** Last 4 digits of account number 6794 \$4,000.00 Nonpriority Creditor's Name PO Box 6492 When was the debt incurred? Carol Stream, IL 60197-6492 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed

Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes

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Debtor 1 James W Klemz Case number (if know) 4.8 Capital One Bank Last 4 digits of account number 6794 \$3.890.93 Nonpriority Creditor's Name PO Box 6492 When was the debt incurred? Carol Stream, IL 60197-6492 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes 4.9 **Cardmember Service - BP** \$2,200.00 Last 4 digits of account number 4700 Nonpriority Creditor's Name PO Box 15153 When was the debt incurred? Wilmington, DE 19886-5153 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Π Yes Central DuPage Emergency 4.1 7551 \$1,340.00 0 Last 4 digits of account number **Physicians** Nonpriority Creditor's Name Dept 20 1098 PO Box 5940 When was the debt incurred? Carol Stream, IL 60197-5940 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical services

☐ Yes

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Document Page 24 of 54 Debtor 1 James W Klemz Case number (if know) 4.1 Central DuPage Hospital 6000 \$22,413.85 Last 4 digits of account number Nonpriority Creditor's Name PO Box 4090 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only □ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical services ☐ Yes 4.1 2600 Central DuPage Hospital Last 4 digits of account number \$2,040.00 Nonpriority Creditor's Name PO Box 4090 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical services ☐ Yes 4.1 Central DuPage Hospital 0000 \$455.07 Last 4 digits of account number Nonpriority Creditor's Name PO Box 4090 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

Official Form 106 E/F

debt

■ No

☐ Yes

☐ Student loans

report as priority claims

■ Other. Specify medical services

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

Document Page 25 of 54 Debtor 1 James W Klemz Case number (if know) 4.1 Chase/Bank One Card Serv 1634 \$2,266.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 15298 When was the debt incurred? Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes 4.1 **Choice Recovery Inc** 1544 \$505.00 Last 4 digits of account number 5 Nonpriority Creditor's Name PO Box 20790 When was the debt incurred? Columbus, OH 43220-3662 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify COLLECTION ☐ Yes 4.1 **Illinois Emergency Medicine** 2600 \$890.00 Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 71402 When was the debt incurred? Chicago, IL 60694-1400 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed

Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical services ☐ Yes

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2081 East 8th Street
Brooklyn, NY 11223

Number Street City State Zlp Code
Who incurred the debt? Check one.

Debtor 1 only
Debtor 2 only
Debtor 1 and Debtor 2 only
At least one of the debtors and another
Check if this claim is for a community debt
stee claim subject to offset?

No
Debtor 2 only
Check if this claim is for a community debt
Student loans
Debtor 2 only
Obligations arising out of a separation agreement or divorce that you did not report as priority claims
Other. Specify
Fraudulent debt negotiation services

Document Page 27 of 54 Debtor 1 James W Klemz Case number (if know) 4.2 State Collection Service Inc 2028 \$462.00 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 6250 When was the debt incurred? Madison, WI 53716-0250 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify COLLECTION ☐ Yes 4.2 Suburban Radiologists SC 0674 \$516.00 Last 4 digits of account number Nonpriority Creditor's Name 1446 Momentum Place When was the debt incurred? Chicago, IL 60689-5314 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical services ☐ Yes 4.2 Suburban Radiologists SC 0674 \$1,211,00 Last 4 digits of account number Nonpriority Creditor's Name 1446 Momentum Place When was the debt incurred? Chicago, IL 60689-5314 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

debt

■ No

☐ Yes

☐ Student loans

report as priority claims

■ Other. Specify medical services

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

Document Page 28 of 54 Debtor 1 James W Klemz Case number (if know) 4.2 Synchrony Bank 1352 \$4,000.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 965060 Orlando, FL 32896-5060 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes 4.2 Village of Bolingbrook 0961 \$1,587.48 Last 4 digits of account number Nonpriority Creditor's Name PO Box 88850 When was the debt incurred? Carol Stream, IL 60188 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical services ☐ Yes 4.2 Wells Fargo Financial Bank c/o 0339 \$1,772,36 Last 4 digits of account number Nonpriority Creditor's Name PO Box 660431 When was the debt incurred? Dallas, TX 75266-0431 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans

debt

■ No

☐ Yes

report as priority claims

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

Document Page 29 of 54 Debtor 1 James W Klemz Case number (if know) 4.2 Winfield Laboratory Consultants SC \$370.00 2156 Last 4 digits of account number 6 Nonpriority Creditor's Name **Dept 4408** When was the debt incurred? Carol Stream, IL 60122-4408 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical services ☐ Yes 4.2 5094 Winfield Radiology Consultants SC \$99.00 Last 4 digits of account number Nonpriority Creditor's Name 6910 S Madison St When was the debt incurred? Willowbrook, IL 60527-5504 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical services ☐ Yes 4.2 Winfield Radiology Consultants SC 5094 \$99.00 Last 4 digits of account number 8 Nonpriority Creditor's Name When was the debt incurred? 6910 S Madison St Willowbrook, IL 60527-5504 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only □ Unliquidated ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

■ Other. Specify medical services

oxed Obligations arising out of a separation agreement or divorce that you did not

lacksquare Debts to pension or profit-sharing plans, and other similar debts

Part 4: Add the Amounts for Each Type of Unsecured Claim

debt

■ No

☐ Yes

☐ Student loans

report as priority claims

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

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Debtor 1 James W Klemz

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6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 110,198.56
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 110,198.56

			$\frac{111}{111}$			
Fill in this information to identify your case:						
Debtor 1	James W Klemz					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)						

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					<u></u>
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3	O.I.y		- Clair	2 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.5	-				
0	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	Oity		Oldio	Zii Oodo	

		Document	Page 32 of	54	_
Fill in this inf	ormation to identify your ca	ise:			
Debtor 1	James W Klemz				
Daletano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
	orm 106H le H: Your Code	btors			12/15
people are fili fill it out, and your name an	ng together, both are equal	ly responsible for supplyir oxes on the left. Attach the Answer every question.	ng correct informatio e Additional Page to	on. If more space is this page. On the to	rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write
□ No ■ Yes					
	the last 8 years, have you li California, Idaho, Louisiana, N				rty states and territories include)
■ No. Go	to line 3. id your spouse, former spous	e, or legal equivalent live wit	th you at the time?		
in line 2 a	again as a codebtor only if t iD), Schedule E/F (Official F	hat person is a guarantor	or cosigner. Make su	ure you have listed	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fil
	umn 1: Your codebtor e, Number, Street, City, State and ZIP	Code		Column 2: The ci	reditor to whom you owe the debt les that apply:
	ry Klemz ouse			■ Schedule D, □ Schedule E/f □ Schedule G PNC Bank NA	-, line

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Fill	in this information to identify	y your cas	e:							
Del	btor 1 James	s W Klei	nz							
	btor 2					_				
Uni	ited States Bankruptcy Cour	rt for the:	NORTHERN DISTRIC	CT OF ILLINOIS						
	se number nown)					Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:				
0	fficial Form 106l	<u> </u>					M	IM / DD/ Y	YYY	· ·
S	chedule I: Your	Inco	me					, 22, .		12/1
sup spo atta	as complete and accurate a plying correct information use. If you are separated a ch a separate sheet to this Describe Emplo	n. If you a and your s form. O	re married and not filir spouse is not filing wi	ng jointly, and your spe th you, do not include	ouse i	is liv mati	ing with on about	you, incluyour spo	ude informat ouse. If more	ion about your space is needed,
1.	Fill in your employment information.			Debtor 1				Debtor 2	or non-filin	g spouse
	If you have more than one attach a separate page will information about addition	ith	Employment status	■ Employed□ Not employed				■ Employed□ Not employed		
	employers.		Occupation					retired		
	Include part-time, seasona self-employed work.	al, or	Employer's name	Aerotek						
	Occupation may include so or homemaker, if it applies		Employer's address	7301 Parkway Dr Hanover, MD 2107	' 6					
			How long employed th	nere?				_		
Pai	rt 2: Give Details Abo	out Montl	nly Income							
	mate monthly income as c use unless you are separate		e you file this form. If y	you have nothing to repo	ort for	any	line, write	\$0 in the	space. Includ	de your non-filing
	ou or your non-filing spouse he space, attach a separate s			ombine the information for	or all e	emple	oyers for	that perso	n on the lines	below. If you need
							For Deb	otor 1	For Debto non-filing	
2.	List monthly gross wage deductions). If not paid m				2.	\$	2,	,600.00	\$	0.00
3.	Estimate and list monthl	ly overtin	ne pay.		3.	+\$		0.00	+\$	0.00

2,600.00

\$

0.00

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	James W Klemz	-		Case	number (if known)				
					Fo	r Debtor 1		or Debtor		
	Cop	y line 4 here	4.		\$_	2,600.00	\$		0.00	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	363.48	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5k	ο.	\$	0.00	\$		0.00	=
	5c.	Voluntary contributions for retirement plans	50	.	\$	0.00	\$		0.00	_
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.00	\$		0.00	_
	5e.	Insurance	56	€.	\$	0.00	\$		0.00	_
	5f.	Domestic support obligations	5f		\$	0.00	\$		0.00	_
	5g.	Union dues	50	j.	\$	0.00	\$		0.00	_
	5h.	Other deductions. Specify:	5h	า.+	\$	0.00	+ \$		0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$	363.48	\$		0.00	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,236.52	\$		0.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a	\$	0.00	\$		0.00	
	8b.	Interest and dividends	8k		\$	0.00	\$		0.00	
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	80 80		\$_ \$_	0.00	\$ \$		0.00	_
	8e.	Social Security	86		\$	0.00	\$		0.00	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	_ 8f _ 8g	g.	\$_ \$_	0.00	\$		0.00	
	8h.	Other monthly income. Specify:	_ 8r _	1.+	\$_	0.00	+ \$		0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	;	\$	0.00	\$		0.0	0
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		2,236.52 + \$		0.00	= \$	2.236.52
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ-		2,230.32		<u> </u>		2,230.32
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	dep			•		Schedule	e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							\$	2,236.52
13.	Doy	ou expect an increase or decrease within the year after you file this form	?						Combi monthl	ned ly income
		No.								
		Yes Explain:								ļ

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						•		
Fill i	n this informa	tion to identify yo	our case:					
Debte	or 1	James W Kle	emz			Chec	k if this is:	
Date	0						An amended filing	den en en en en el Cilia en els en el
Debte	or 2 use, if filing)							ving postpetition chapter the following date:
						_		
Unite	ed States Bankr	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e number own)							
(II KII	OWII)							
Of	ficial Fo	rm 106J						
		J: Your	Exper	ises				12/1
Be a	s complete a	and accurate as	s possible. eded, atta	. If two married people ar				
Part 1.	1: Descr Is this a joir	ibe Your House	ehold					
١.	_							
	■ No. Go to		in a canar	ate household?				
			iii a sepai	ate nousenoid?				
			et file Offici	al Form 106J-2, Expenses	for Soporato House	shold of Dobt	or 2	
		es. Debiol 2 mas	St IIIC OIIICI	ari omi 1000-2, <i>Expenses</i>	Tor Separate Flouse	shold of Debt	01 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						Yes
								□ No
								□ Yes □ No
								☐ Yes
					-		· 	□ No
								☐ Yes
3.		enses include	. =	No				
		f people other t d your depende		Yes				
		ate Your Ongoi		ly Expenses uptcy filing date unless y	ou are using this f	orm oc o cui	anlament in a Cha	enter 12 eace to report
expe				y is filed. If this is a supp				
				government assistance i				
	value of sucl icial Form 10		d have inc	cluded it on Schedule I: Y	our Income		Your exp	enses
(0		.01.)					7 7 7	
4.		or home owners and any rent for th		ses for your residence. In	nclude first mortgag	e 4. \$		734.52
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		rty, homeowner's	s, or renter	's insurance		4b. \$		0.00
		•	-	ıpkeep expenses		4c. \$		130.00
		owner's associa				4d. \$		0.00
5.	Additional r	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00

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Deb	otor 1	James W	/ Klemz	Ca	ase num	ber (if known)	
6.	Utiliti	ies:					
٥.	6a.		heat, natural gas		6a.	\$	180.00
	6b.	-	ver, garbage collection		6b.	\$	133.00
	6c.		e, cell phone, Internet, satellite, and o	cable services	6c.	\$	295.00
	6d.	Other. Spe	•		6d.	· -	0.00
7.			ekeeping supplies		- 7.	·	700.00
8.			hildren's education costs		8.	\$	0.00
9.	Cloth	ning, laund	ry, and dry cleaning		9.	\$	35.00
10.		•	roducts and services		10.	\$	40.00
		-	ntal expenses		11.	\$	310.00
			Include gas, maintenance, bus or tra	ain fare.		· ——	
			ar payments.		12.	\$	475.00
13.	Enter	rtainment,	clubs, recreation, newspapers, ma	agazines, and books	13.	\$	240.00
14.	Chari	itable cont	ributions and religious donations		14.	\$	43.00
15.	Insur						
			surance deducted from your pay or	ncluded in lines 4 or 20.			
		Life insura			15a.	·	0.00
	15b.	Health ins	urance		15b.	·	252.00
	15c.	Vehicle ins	surance		15c.		125.00
			rance. Specify:		15d.	\$	0.00
16.			clude taxes deducted from your pay	or included in lines 4 or 20.			
	Speci				_ 16.	\$	0.00
17.			ease payments:		47-	Φ.	
			ents for Vehicle 1		17a.	•	367.00
			ents for Vehicle 2		17b.	·	0.00
		Other. Spe	-		_ 17c.		0.00
		Other. Spe	•		_ 17d.	\$	0.00
18.	Your	payments	of alimony, maintenance, and sup	port that you did not report as	18.	\$	0.00
10			your pay on line 5, <i>Schedule I, You</i> s you make to support others who		10.	ψ	0.00
19.	Speci		s you make to support others who	do not live with you.	19.	Φ	0.00
20			erty expenses not included in line	s 4 or 5 of this form or on School	_	our Income	
20.			on other property	s 4 or 5 or tills form or on 5chedu	20a.		0.00
		Real estat			20b.		0.00
			nomeowner's, or renter's insurance		20c.		0.00
			ice, repair, and upkeep expenses		20d.	· ·	0.00
			er's association or condominium due	ae	20a.	•	0.00
21		r: Specify:	cr 3 association of condominating dec			+\$	
۷۱.	Other	i. Specily:			_ 21.	+φ	0.00
22.	Calcu	ulate your ı	nonthly expenses				
	22a. /	Add lines 4	through 21.			\$	4,059.52
	22b. (Copy line 22	2 (monthly expenses for Debtor 2), if	any, from Official Form 106J-2		\$	
	22c. A	Add line 22a	a and 22b. The result is your monthl	v expenses.		\$	4,059.52
			ŕ	, -			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
23.		-	monthly net income.			_	
			12 (your combined monthly income)		23a.	· -	2,236.52
	23b.	Copy your	monthly expenses from line 22c abo	ove.	23b.	-\$	4,059.52
	00	0.1.		41.			
	23c.		our monthly expenses from your mo	nthly income.	23c.	\$	-1,823.00
		THE TESUIT	is your monthly net income.		_00.	· ·	,=====
24.	Do vo	ou expect a	an increase or decrease in your ex	penses within the year after you	file this	s form?	
			ou expect to finish paying for your car loan				crease or decrease because of a
			terms of your mortgage?				
	■ No	ο.					
	□Ye	es.	Explain here:				

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Fill in th	nis information t	o identify your	case:					
Debtor 1	1 Jam	nes W Klemz						
	First N		Middle Name	La	st Name			
Debtor 2								
(Spouse if,	, filing) First N	lame	Middle Name	La	st Name			
United S	States Bankruptcy	/ Court for the:	NORTHERN DISTRI	CT OF ILLINC	IS			
Case nu	ımber							
(if known)								Check if this is an
								amended filing
Officia	al Form 106	<u>Dec</u>						
Dec	laration	About a	ın Individua	al Debt	or's Sch	edules		12/15
If two ma	arried people are	e filing togethe	r, both are equally res	ponsible for	supplying correc	t information.		
.,								
			le bankruptcy schedu					ncealing property, or risonment for up to 20
	r both. 18 U.S.C.			ariki apicy ca.	e can result iii ii	ιτιο σ αρ το ψ25 ο,τ	oo, or imp	risoninent for up to 20
	Sign Below							
Dio	d you pay or agr	ee to pay some	one who is NOT an at	torney to help	you fill out ban	kruptcy forms?		
	No							
	Yes. Name of	person						etition Preparer's Notice,
						Declaration	on, and Sign	nature (Official Form 119)
Und	der penalty of pe	rjury, I declare	that I have read the si	ummary and	schedules filed w	vith this declarat	ion and	
that	t they are true ar	nd correct.		-				
x	/s/ James W k	Clomz		х				
^	James W Klei			^	Signature of De	btor 2		
	Signature of Del				- G	-		
	Date July 9,	2016			Date			

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Fill	in this in	formation to identify you	r case:			
Deb	otor 1	James W Klemz				
		First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
' '						
Uni	ted States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	se number own)					Check if this is an amended filing
Sta Be a info	ateme	ete and accurate as poss	ible. If two married people , attach a separate sheet to	duals Filing for E are filing together, both are this form. On the top of an	e equally responsible for su	
		,	arital Status and Where Yo	u Lived Before		
1.	What is	your current marital state	us?			
	■ Mar	ried married				
2.	During t	he last 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	. List all of the places you	lived in the last 3 years. Do r	not include where you live nov	N.	
	Debtor	1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
				gal equivalent in a commui evada, New Mexico, Puerto R		
	■ No □ Yes	. Make sure you fill out <i>Sc</i>	hedule H: Your Codebtors (C	Official Form 106H).		
Par	t 2 Ex	plain the Sources of You	ır Income			
4.	Fill in the If you are	total amount of income yo	ou received from all jobs and a have income that you received	ng a business during this y all businesses, including part re together, list it only once u	t-time activities.	endar years?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Case 16-22118 Doc 1 Filed 07/09/16 Entered 07/09/16 15:10:32 Desc Main Page 39 of 54 Document Case number (if known) James W Klemz Debtor 1 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 2 **Debtor 1** Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an ☐ No. individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? \square No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment Total amount** Amount vou Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο

☐ Yes. List all payments to an insider.

Insider's Name and Address Reason for this payment **Dates of payment Total amount** Amount you paid still owe

Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

Yes. List all payments to an insider

Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment Include creditor's name paid still owe

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Debtor 1 James W Klemz Document Page 40 of 54 Case number (if known)

Pa	tt 4: Identify Legal Actions, Repossess	ions, and Foreclosures			
9.	Within 1 year before you filed for bankru List all such matters, including personal injumodifications, and contract disputes.				
	■ No □ Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency	Status of th	e case
10.	Within 1 year before you filed for bankru Check all that apply and fill in the details be		erty repossessed, foreclos	sed, garnished, attached	I, seized, or levied?
	No. Go to line 11.☐ Yes. Fill in the information below.				
	Creditor Name and Address	Describe the Property		Date	Value of the property
		Explain what happene	d		
11.	Within 90 days before you filed for banks accounts or refuse to make a payment b ■ No □ Yes. Fill in the details.		cluding a bank or financial	institution, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date action was taken	Amount
10	Within 1 year before you filed for bankru	ntey, was any of your prop	arty in the pessesion of a		fit of croditors a
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, or		erty in the possession of a	in assignee for the bene	ent of creditors, a
	■ No				
	☐ Yes				
Pa	tt 5: List Certain Gifts and Contribution	s			
13.	Within 2 years before you filed for bankr ■ No	uptcy, did you give any gif	ts with a total value of mor	e than \$600 per person?	?
	☐ Yes. Fill in the details for each gift.				
	Gifts with a total value of more than \$60 per person	Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or or		ts or contributions with a t	otal value of more than	\$600 to any charity?
	Gifts or contributions to charities that t more than \$600		u contributed	Dates you contributed	Value
	Charity's Name Address (Number, Street, City, State and ZIP Code	e)			
Pa	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling?	ptcy or since you filed for I	bankruptcy, did you lose a	nything because of thef	t, fire, other disaster
	No				
	☐ Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred		overage for the loss urance has paid. List pending of Schedule A/B: Property	Date of your loss	Value of property lost

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Debtor 1 James W Klemz

	_		
Part 7:	List Certain	Payments	or Transfers

		=					
16.	con	hin 1 year before you filed for bankruptcy, sulted about seeking bankruptcy or preparude any attorneys, bankruptcy petition prepar	ring a bankruptcy pet	tition?	. ,	,. ·	ty to anyone you
		No Yes. Fill in the details.					
	Ad Em	rson Who Was Paid dress nail or website address rson Who Made the Payment, if Not You	Description and variansferred	alue of any prop	perty	Date payment or transfer was made	Amount of payment
 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone very promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. 					ty to anyone who		
		Yes. Fill in the details.					
		rson Who Was Paid dress	Description and variansferred	alue of any prop	perty	Date payment or transfer was made	Amount of payment
18.	8. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.						
	Ad	rson Who Received Transfer dress	Description and very property transfer		payment	e any property or is received or debts exchange	Date transfer was made
	Pe	rson's relationship to you					
19.	 9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No 					of which you are a	
	∐ Na	Yes. Fill in the details.	Description and	value of the prop	auto stranafa	uu o al	Data Transfer was
	Na	me of trust	Description and v	value of the prop	erty transfe	rrea	Date Transfer was made
Par	t 8:	List of Certain Financial Accounts, Instr	ruments, Safe Deposi	t Boxes, and Sto	rage Units		
20.	solo	hin 1 year before you filed for bankruptcy, d, moved, or transferred?	•				,
	hou	ude checking, savings, money market, or uses, pension funds, cooperatives, association No				niales III Daliks, Cleuit	umons, brokerage
		Yes. Fill in the details.					
		dress (Number, Street, City, State and ZIP	account number	Type of accour	c m	ate account was losed, sold, noved, or ansferred	Last balance before closing or transfer
21.		you now have, or did you have within 1 ye h, or other valuables?	ar before you filed for	bankruptcy, any	y safe depos	sit box or other deposi	tory for securities,
		No Yes. Fill in the details.					
		me of Financial Institution dress (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	e contents	Do you still have it?

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Del	otor 1	James W Klemz	Document	Page 42 of	† 54 Case number (<i>if known</i>)	
22.	Have	you stored property in a storage unit or p	lace other than you	ır home within 1	year before you filed for bankruptcy	?
		No Yes. Fill in the details.				
		e of Storage Facility 'ess (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe the contents	Do you still have it?
Par	t 9:	Identify Property You Hold or Control for	Someone Else			
23.	•	ou hold or control any property that someomeone.	one else owns? Inc	lude any proper	ty you borrowed from, are storing fo	r, or hold in trust
		No Yes. Fill in the details.				
	Own	er's Name 'ess (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe the property	Value
Par	t 10:	Give Details About Environmental Inform	,			
For	the pu	rpose of Part 10, the following definitions	apply:			
	toxic	onmental law means any federal, state, or substances, wastes, or material into the a ations controlling the cleanup of these su	ir, land, soil, surfac	ce water, ground	- •	
		neans any location, facility, or property as n, operate, or utilize it, including disposal	-	environmental l	law, whether you now own, operate,	or utilize it or used
		rdous material means anything an environ dous material, pollutant, contaminant, or s		as a hazardous	s waste, hazardous substance, toxic	substance,
Rep	ort all	notices, releases, and proceedings that ye	ou know about, reg	jardless of wher	n they occurred.	
24.	Has a	ny governmental unit notified you that yo	u may be liable or բ	ootentially liable	under or in violation of an environm	ental law?
		No ⁄es. Fill in the details.				
		e of site 'ess (Number, Street, City, State and ZIP Code)	Governmental un Address (Number, ZIP Code)		Environmental law, if you know it	Date of notice
25.	Have	you notified any governmental unit of any	release of hazardo	ous material?		
	_	No Yes. Fill in the details.				
		e of site 'ess (Number, Street, City, State and ZIP Code)	Governmental un Address (Number, ZIP Code)		Environmental law, if you know it	Date of notice
26.	Have	you been a party in any judicial or admini	strative proceeding	ı under any envi	ironmental law? Include settlements	and orders.
		No ⁄es. Fill in the details.				
		e Title e Number	Court or agency Name Address (Number, State and ZIP Code)		Nature of the case	Status of the case
Par	t 11:	Give Details About Your Business or Con	•	usiness		

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)

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		☐ A partner in a partnership				
	☐ An officer, director, or managing executive of a corporation					
		☐ An owner of at least 5% of the votin	g or equity securities of a corporation			
		No. None of the above applies. Go to F	Part 12.			
		Yes. Check all that apply above and fill	in the details below for each business.			
	Ad	siness Name Idress	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.		
	(Nu	mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed		
28.		hin 2 years before you filed for bankrupt titutions, creditors, or other parties.	cy, did you give a financial statement to an	yone about your business? Include all financial		
		No				
		Yes. Fill in the details below.				
	Ad	ime Idress mber, Street, City, State and ZIP Code)	Date Issued			
Par	t 12:	Sign Below				
are with 18 U	true a ba J.S.C Jam	and correct. I understand that making a ankruptcy case can result in fines up to . §§ 152, 1341, 1519, and 3571. nes W Klemz	false statement, concealing property, or ob \$250,000, or imprisonment for up to 20 yea	leclare under penalty of perjury that the answers otaining money or property by fraud in connectior rs, or both.		
		W Klemz ire of Debtor 1	Signature of Debtor 2			
Dat	e .	July 9, 2016	Date			
Did ■ N	lo	attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?		
	10		t an attorney to help you fill out bankruptcy			
ЦY	'es. l	Name of Person Attach the <i>Bankru</i>	ptcy Petition Preparer's Notice, Declaration, a	nd Signature (Official Form 119).		

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Fill in this inform	ation to identify your	.350:				
		case.				
Debtor 1	James W Klemz First Name	Middle Name		Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name		
			-DIOT OF !!!			
United States Ban	kruptcy Court for the:	NORTHERN DIST	IRICT OF ILL	INOIS		
Case number						Charlett (this is a
(if known)						Check if this is an amended filing
Official For	m 100					
Official For			.:		*	7
Statemen	t of Intentio	n tor indiv	iduais	Filing Under C	napter i	12/15
If you are an indiv	ridual filing under cha	oter 7. vou must fil	l out this for	n if:		
	claims secured by yo	, ,		·· ···		
	ed personal property a					
	er is earlier, unless th			bankruptcy petition or by tuse. You must also send co		
	ople are filing together	in a joint case, bo	th are equall	y responsible for supplying	correct inform	nation. Both debtors must
Be as complete a			needed, atta	ach a separate sheet to this	form. On the t	op of any additional pages,
write yo	ur name and case num	ilber (il kilowii).				
Part 1: List Yo	ur Creditors Who Have	e Secured Claims				
		art 1 of Schedule D	: Creditors W	/ho Have Claims Secured b	y Property (Off	ficial Form 106D), fill in the
information bel	ow. ditor and the property the	hat is collateral	What do yes	ou intend to do with the prodebt?	perty that	Did you claim the property as exempt on Schedule C?
Creditor's PN	NC Bank NA		□ Surrend	er the property.		□ No
name:				the property and redeem it.		
Description of	2014 Chevrolet Cru	17A 27 000		he property and enter into a		Yes
property	miles	aze 27,000		mation Agreement. he property and [explain]:		
securing debt:				ne property and [explain].		
	ur Unexpired Persona d personal property lea		in Schedule	G: Executory Contracts and	d Unexpired Le	eases (Official Form 106G), fill
in the information	below. Do not list rea	Il estate leases. Un	expired lease	es are leases that are still ir oes not assume it. 11 U.S.C	n effect; the lea	se period has not yet ended.
Describe your un	nexpired personal proj	perty leases			Wil	I the lease be assumed?
		·			_	
Lessor's name: Description of leas	sed					No
Property:						Yes
Loccor's name:					_	
Lessor's name: Description of leas	sed					NO
Property:						Yes
Lessor's name:						No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Debt	tor 1	James W Klemz	Case number (if known)
	cription erty:	of leased		☐ Yes
Desc	sor's na cription perty:	ame: n of leased		□ No
Less	sor's na	ame: a of leased		□ No □ Yes
Less	or's na	ame: n of leased		□ No □ Yes
Desc	or's na cription erty:	ame: a of leased		□ No
Part	3: 5	Sign Below		
		alty of perjury, I declare that I have ind at is subject to an unexpired lease.	dicated my intention about any property of my estate that se	ecures a debt and any personal
X .		ames W Klemz	X Signature of Debtor 2	
		ture of Debtor 1	Signature of Debiol 2	
	Date	July 9, 2016	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

- \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-22118 Doc 1 Filed 07/09/16 Entered 07/09/16 15:10:32 Desc Main Document Page 50 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In r	e James W Klemz		Case No.			
		Debtor(s)	Chapter	7		
	DISCLOSURE OF COMPEN	NSATION OF ATTORM	NEY FOR DE	EBTOR(S)		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
				0.00		
	Prior to the filing of this statement I have received		\$	0.00		
	Balance Due			0.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person un	less they are mem	bers and associates of my law firm.		
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.					
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credito d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hor 	ement of affairs and plan which more and confirmation hearing, and educe to market value; exemins as needed; preparation a	ay be required; any adjourned hea	rings thereof;		
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.	chargeability actions, judicia	ervice: al lien avoidanc	es, relief from stay actions or		
		CERTIFICATION				
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	y agreement or arrangement for pa	nyment to me for r	epresentation of the debtor(s) in		
	July 9, 2016	/s/ Daniel L. Giudic	e			
1	Date	Daniel L. Giudice				
		Signature of Attorney Giudice Law, Ltd.				
		201 North Church F				
		Bensenville, IL 6010 630-595-4520 Fax:				
		giudicelaw@gmail.				
		Name of law firm				

United States Bankruptcy CourtNorthern District of Illinois

In re	James W Klemz		Case No.		
		Debtor(s)	Chapter 7		
	VERIFICATION OF CREDITOR MATRIX				
		Number of	Number of Creditors: 30		
	The above-named Debtor(s (our) knowledge.	s) hereby verifies that the list of credi	tors is true and correc	et to the best of my	

Adventist Bolingbrook Hospital 500 Remington Blvd Bolingbrook, IL 60440

Adventist Bolingbrook Hospital 500 Remington Blvd PO Box 7000 Bolingbrook, IL 60440-7000

Adventist Bolingbrook Hospital 500 Remington Blvd PO Box 7000 Bolingbrook, IL 60440-7000

Armor Systems Corp 1700 Kiefer Dr, Suite 1 Zion, IL 60099-5105

Bank of America Po Box 982238 El Paso, TX 79998-2238

BP VISA/Syncb PO Box 530942 Atlanta, GA 30353-0942

Capital One Bank PO Box 6492 Carol Stream, IL 60197-6492

Capital One Bank PO Box 6492 Carol Stream, IL 60197-6492

Cardmember Service - BP PO Box 15153 Wilmington, DE 19886-5153

Central DuPage Emergency Physicians Dept 20 1098 PO Box 5940 Carol Stream, IL 60197-5940

Central DuPage Hospital PO Box 4090 Carol Stream, IL 60197 Central DuPage Hospital PO Box 4090 Carol Stream, IL 60197

Central DuPage Hospital PO Box 4090 Carol Stream, IL 60197

Chase/Bank One Card Serv PO Box 15298 Wilmington, DE 19850

Choice Recovery Inc PO Box 20790 Columbus, OH 43220-3662

Illinois Emergency Medicine PO Box 71402 Chicago, IL 60694-1400

Lending Club Corp 21 Stevenson, Suite 300 San Francisco, CA 94105

Merchants' Credit Guide Co. 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Midwest Bank PO Box 689 Freeport, IL 61032-0689

PNC Bank NA PO Box 3180 Pittsburgh, PA 15222

Robert S. Gitmeid & Assoc., PLLC 2081 East 8th Street Brooklyn, NY 11223

State Collection Service Inc PO Box 6250 Madison, WI 53716-0250 Suburban Radiologists SC 1446 Momentum Place Chicago, IL 60689-5314

Suburban Radiologists SC 1446 Momentum Place Chicago, IL 60689-5314

Synchrony Bank Attn: Bankruptcy Dept. PO Box 965060 Orlando, FL 32896-5060

Village of Bolingbrook PO Box 88850 Carol Stream, IL 60188

Wells Fargo Financial Bank c/o PO Box 660431 Dallas, TX 75266-0431

Winfield Laboratory Consultants SC Dept 4408 Carol Stream, IL 60122-4408

Winfield Radiology Consultants SC 6910 S Madison St Willowbrook, IL 60527-5504

Winfield Radiology Consultants SC 6910 S Madison St Willowbrook, IL 60527-5504